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UTILITY PATENT
Date: February 21, 2002
File No. 0212.65818

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Verica Maras

For:

ROTARY TOOL FLEX SHAFT WITH

LOCK PIN AND END CAP

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: U.S. Patent and Trademark Office, Commissioner for Patents, Washington, D.C. 20231, on this date.

February 21, 2002

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Enc	losed	210

- (X) <u>17</u> pages of specification, including <u>18</u> claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- ( ) an unexecuted oath or declaration, with power of attorney.
- (X) 3 sheet(s) of informal drawing(s).
- ( ) \_\_\_\_ sheet(s) of formal drawings(s).
- (X) Assignment(s) of the invention to <u>S-B Power Tool Company</u>.
- (X) Assignment Form Cover Sheet.
- (X) A check in the amount of \$\frac{40.00}{}\$ to cover the fee for recording the assignment(s) is enclosed.
- ( ) Information Disclosure Statement.
- ( ) Form PTO-1449 and cited references.
- ( ) Associate power of attorney.
- ( ) Priority Document.

## Fee Calculation For Claims As Filed

	a)	Basic Fee									\$	740.00
	b)	Independent Claims	_2	-	3	=	_0_	x	\$ 84.00	=	\$_	0
	c)	Total Claims	18_	-	20	=	0	x	\$ 18.00	=	\$_	0
	d)	Fee for Multiple Dependent	Claims						\$280.00	=	\$_	0
							Total Fili	ing	Fee		\$_	740.00
Applicant qualifies as a Small Entity, reducing Filing Fee by half to									\$_	(		

- (X) A check in the amount of \$\frac{740.00}{} to cover the filing fee is enclosed.
- () Charge \$\_\_\_\_\_ to Deposit Account No. 07-2069.
- ( ) Other \_\_\_\_\_
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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